



## Follow-up Guidelines for Head and Neck Squamous Cell Cancer

### Goals of surveillance:

Although there is no evidence of survival advantage, regular surveillance can detect early recurrences and second primary cancers. Surveillance is also helpful in detecting and managing treatment related complications. The risk of disease relapse is estimated at between 40% and 60% for patients with locally advanced disease, with most recurrences occurring within the first 2 years after the primary diagnosis. The incidence of second primaries is 2%-4% per year and remains relatively constant over time.

### Suggested Follow up:

- History and physical examination, preferably by ENT surgeon, post treatment, once every three months for the first two years, then once every six months until year five, and then once a year.
- Radiological investigations are not routinely recommended unless clinically indicated.
- Annual low dose helical CT scan of the lung for patients at high risk of developing secondary lung malignancy. This include patients with squamous cell cancer of the head and neck and history of 20 or more pack years of smoking.
- HPV related head and Neck cancer should undergo screening for HPV related malignancies including cervical cancer with Pap smears.
- For patients treated with radiation therapy to the neck, monitoring of TSH every six months is recommended as the incidence of hypothyroidism is quite significant.
- Dental examination is recommended once every six months. Patients are encouraged to perform careful daily oral hygiene. Daily fluoride treatment is suggested under the guidance of dentist, as it has shown to reduce the incidence of dental caries after radiation therapy.
- Smoking cessation and counselling for alcohol abstinence should be provided to at risk patients.

### References:

<https://www.uptodate.com/contents/posttreatment-surveillance-of-squamous-cell-carcinoma-of-the-head-and-neck>

[https://www.nccn.org/professionals/physician\\_gls/pdf/head-and-neck.pdf](https://www.nccn.org/professionals/physician_gls/pdf/head-and-neck.pdf)

<https://doi.org/10.1016/j.annonc.2020.07.011>